

6101525

ISSUE **BEST AVAILABLE COPY** (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	13	18	3-16
O.I.P.E. CLASSIFIER	KL	1019	4 901
FORMALITY REVIEW	SC	1077	04-27-01
RESPONSE FORMALITY REVIEW			9/14/01

### INDEX OF CLAIMS

✓ ..... Rejected  
= ..... Allowed  
- (Through numeral)... Canceled  
+ ..... Restricted  
N ..... Non-elected  
I ..... Interference  
A ..... Appeal  
O ..... Objected

Claim		Date	
Final	Original		
1	2		
3	4		
5	6		
7	8		
9	10		
11	12		
13	14		
15	16		
17	18		
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49	50		

Claim		Date	
Final	Original		
51	52		
53	54		
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95	96		
97	98		
99	100		

Claim		Date	
Final	Original		
101	102		
103	104		
105	106		
107	108		
109	110		
111	112		
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117	118		
119	120		
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149	150		

If more than 150 claims or 10 actions  
staple additional sheet here